



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1 fm 2661
CUSTOMER NO. 35811

Art Unit : 2661
Examiner : Robert B. Harrell
Serial No. : 10/005,706
Filed : November 12, 2001
Inventor : Stephane Schinazi
Title : SINGLE INTEGRATED MONOLITHIC
: CHIP INCORPORATING INTERNET
: PROTOCOLS PROCESSED
: BY ON-CHIP DSP

Docket No.: 1341-01
Confirmation No.: 7738

Dated: September 5, 2006

Mail Stop Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Certificate of Mailing Under 37 CFR 1.8

For

Postcard
\$60.00 Check

Claim of Extension of Time for Response, in duplicate
Amendment Transmittal Letter, in Duplicate
Response

Claim for Priority Under 35 U.S.C. §119
Certified Copy of FR 00/03322

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to **Mail Stop Amendment** Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date appearing below.

Name of Applicant, Assignee, Applicant's Attorney
or Registered Representative:

DLA Piper US LLP
Customer No. 035811

By: _____ *PB*

Date: _____ *5 SEP 2006*



Attorney Docket No.: 1341-01

Re Application of Stephane Schinazi

Serial No.: 10/005,706

Filed: November 12, 2001

For: SINGLE INTEGRATED MONOLITHIC CHIP INCORPORATING INTERNET PROTOCOLS PROCESSED BY ON-CHIP DSP

Mail Stop Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
 A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
 No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	RATE	RATE
TOTAL * 11	-	**20 =	ADD'L FEE	ADD'L FEE
INDEP. * 2	-	** 3 =		
Application Size Fee				
First Presentation of Multiple Dependent Claim				
TOTAL ADDITIONAL FEE			\$ _____	\$ _____

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-2719 in the amount of \$ _____. A duplicate copy of this sheet is enclosed.
- Payment in the amount of \$ _____. is attached.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.

- x Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
- x Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,


T. Daniel Christenbury
Reg. No. 31,750
Attorney for Applicant

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